

032904

2213 U.S.PTO

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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(only for new nonprovisional applications under 37 CFR 1.53(b))

*Attorney Docket No.*

MIT5039 USNP

*First Inventor*

Les Hull

*Title*

PACKAGE FOR STERILE REAMER

*Express Mail Label No.*

EV 312158432 US

22141 0/8122046 U.S.PTO

032904

**APPLICATION ELEMENTS**

See MPEP Chapter 600 concerning utility patent application contents.

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|---|---|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br/><i>(submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 14 ]<br/><i>(Preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> <li>- Descriptive Title of the Invention</li> <li>- Cross Reference to Related Applications</li> <li>- Statement Regarding Fed sponsored R&amp;D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings <i>(if filed)</i></li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul> <p>4. <input checked="" type="checkbox"/> Drawing(s)(35 USC 113) [Total Sheets 6]</p> <p>5. Oath or Declaration [Total Pages 3 ]</p> <p>a. <input checked="" type="checkbox"/> NOT Signed</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br/><i>(for continuation/divisional with Box 18 completed)</i></p> <p>i. <input type="checkbox"/> <b><u>DELETION OF INVENTOR(S)</u></b><br/>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> | <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. <input type="checkbox"/> Specification Sequence Listing on:</p> <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or disk</li> <li>ii. <input type="checkbox"/> paper</li> </ul> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p> <p><b>ACCOMPANYING APPLICATION PARTS</b></p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i></p> <p>11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br/><i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Request and Certifications under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other</p> |
|---|---|

18.  If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation  Divisional  Continuation-in-Part (CIP) of prior application No.: , filed

Prior application information: Examiner Group Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

 Customer Number or Bar Code Label 000027777 or  Correspondence Address below

Name: Philip S. Johnson, Esq.

Address: Johnson &amp; Johnson

One Johnson &amp; Johnson Plaza

New Brunswick, NJ 08933-7003 USA

## 20. TELEPHONE CONTACT

Please direct all telephone calls or telefaxes to E. Richard Skula at:

Telephone: (732) 524-2718 Fax: (732) 524-2808

## 21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME E. Richard Skula

SIGNATURE 

DATE March 29, 2004

**DOCKET NO. MIT-5039 USNP**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**Applicants:** Les Hull

**For : PACKAGE FOR STERILE REAMER**

**Express Mail Certificate**

"Express Mail" mailing number: EV 312158432 US

Date of Deposit: **March 29, 2004**

I hereby certify that this complete application, including specification pages, claims, Information Disclosure Statement, Form 1449, informal drawings, and Declaration and Power of Attorney (not signed), is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

A Combined Declaration and Power of Attorney will be submitted to the United States Patent and Trademark Office upon receipt of the U.S. Serial Number for this patent application.

Ceceile Solomon

(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)

<b>FEE TRANSMITTAL</b>		<i>Complete if Known</i>	
		Application Number	TBA
		Filing Date	March 29, 2004
		First Named Inventor	Les Hull
		Group Art Unit	TBA
		Examiner Name	TBA
		Attorney Docket Number	MIT-5039 USNP
		Express Mail Label No.	EV 312158432 US

### FEE CALCULATION

#### CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$ 750.00
TOTAL CLAIMS	8 - 20 =	0	x 18.00	\$
INDEPENDENT CLAIMS	2 - 3 =	0	x 84.00	\$
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$280.00	
			TOTAL FEES	\$ 750.00

#### METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/MIT-5039 USNP/ERS in the amount of \$750.00. Three copies of this sheet are enclosed.
  
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/MIT-5039 USNP/ERS. Three copies of this sheet are enclosed.

<b>SUBMITTED BY:</b>		<i>Complete (if applicable)</i>	
Typed or Printed Name	E. Richard Skula		Reg. No. 31,061
Signature		Date: 03/29/2004	Deposit Account No. 10-0750